

Deborah.Easterling

238608

From: Deborah.Easterling
Sent: Friday, August 24, 2012 9:11 AM
To: 'Addy Mandon'
Subject: RE: 2 utilities protests

Dear Adrienne Mandon and Elizabeth Kohlhoff,

This is to acknowledge receipt of your email to the Public Service Commission. I am forwarding your email and Letter of Protests to our Clerk's Office for processing. Your email and Letter of Protests will become a part of Docket No. 2012-177-WS and will be posted on our website under this docket.

Please let me know if you should require any additional information.

Sincerely,

Deborah Easterling

From: Addy Mandon [<mailto:addyben2@hotmail.com>]
Sent: Friday, August 24, 2012 8:20 AM
To: PSC_Contact
Subject: 2 utilities protests

> Subject: FW:
> Date: Wed, 22 Aug 2012 08:28:56 -0400
> From: Ben.Mandon@andrewroby.com
> To: addyben2@hotmail.com
>
>
>
> Ben Mandon
> Project Manager
>
>
>
> 704.
> 334.5477 – office
> 507.5852- personal
> 332.6351 - fax
> ben.mandon@andrewroby.com
> PO Box 221416
> Charlotte, NC 28222
> www.andrewroby.com
>
> -----Original Message-----

MAIL.DMS



Complaint Form

Print

Date: August 19, 2012

Complainant or Legal Representative Information: * Required Fields

Name * Elizabeth Kohlhoff

Firm (if applicable) _____

Mailing Address * 5080 Mariana Lane

City, State Zip * Tega Cay, SC 29708 Phone * 803 493 4963

E-mail * _____

Name of Utility Involved in Complaint: * Tega Cay Water

NOTE: If AT&T is the utility involved, please complete the attachment located at the end of this form.

Type of Complaint (check appropriate box below.) *

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Billing Error/Adjustments | <input type="checkbox"/> Deposits and Credit Establishment | <input type="checkbox"/> Wrong Rate | <input type="checkbox"/> Refusal to Connect Service |
| <input type="checkbox"/> Disconnection of Service | <input type="checkbox"/> Payment Arrangements | <input type="checkbox"/> Water Quality | <input type="checkbox"/> Line Extension Issue |
| <input type="checkbox"/> Service Issue | <input type="checkbox"/> Meter Issue | | |
| <input checked="" type="checkbox"/> Other (be specific) <u>Rate Increase</u> | | | |

Have you contacted the Office of Regulatory Staff (ORS)? * ☐ Yes ☒ No

Name of
ORS Contact: _____

Concise Statement of Facts/Complaint: * (This section must be completed. Attach additional information to this page if necessary.)

I am opposed to the the rate hike.

The water company has been awarded rate increases in the past and they should have been allocating adequate funding to properly maintain the system while providing the means to maintain a "reasonable" rate structure. In addition, many of the residents are on a fixed income and the proposed increase is exorbitant and they cannot afford such an increase as proposed. I am a school teacher and in the last 5 years have only just received a pay increase of 3%. To increase my water by 14% far exceeds my pay increase the community members have received.

In addition, the water quality does not justify the rate increase. There seems to be many instances that we have to boil our water. Again

Relief Requested: * (This section must be completed. Attach additional information to this page if necessary.)

To deny the request for rate increase.

STATE OF SOUTH CAROLINA)
COUNTY OF York)

VERIFICATION

I, Elizabeth Kohlhoff
Complainant's Name *

verify that I have read my complaint filed on 8-19-12

and know the contents thereof, and that said contents are true.

Elizabeth Kohlhoff
Complainant's Signature *
Page 1 of 2

Internal Use Only

Processed By	Date
H.E.	



Complaint Form

Date: 08/20/2012

Print

Complainant or Legal Representative Information:

* Required Fields

Name * Adrienne Mandon
Firm (if applicable) _____
Mailing Address * 5096 Mariana Lane
City, State Zip * Tega Cay, SC 29708 Phone * 704-302-0868
E-mail * addyben2@hotmail.com

Name of Utility Involved in Complaint: * Utilities Services of South Carolina

NOTE: If AT&T is the utility involved, please complete the attachment located at the end of this form.

Type of Complaint (check appropriate box below.) *

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Billing Error/Adjustments | <input type="checkbox"/> Deposits and Credit Establishment | <input type="checkbox"/> Wrong Rate | <input type="checkbox"/> Refusal to Connect Service |
| <input type="checkbox"/> Disconnection of Service | <input type="checkbox"/> Payment Arrangements | <input type="checkbox"/> Water Quality | <input type="checkbox"/> Line Extension Issue |
| <input type="checkbox"/> Service Issue | <input type="checkbox"/> Meter Issue | | |
| <input checked="" type="checkbox"/> Other (be specific) <u>rate increase</u> | | | |

Have you contacted the Office of Regulatory Staff (ORS)? * ☐ Yes ☒ No **Name of ORS Contact:** _____

Concise Statement of Facts/Complaint: * (This section must be completed. Attach additional information to this page if necessary.)

In September of 2011 a 2" water main ruptured in my neighbors yard and water ran for 8 hours through our yard/house. Water filled our crawl space, submerged thousands of dollars worth of tools and halted construction on our home. It also, submerged our direct vent water heater and washed our backyard away. I watched while 3 men (one of which was sleeping in the grass) waited for parts to arrive to fix the spewing water. My husband and I used their contractor (despite my husband is a contractor) to finish the work. We cooperated in every way to fix the problems as quickly and efficiently as possible. We ran power from our 220 outlet to run dehumidifiers for over a week, moved our belongings into storage pods and requested to have the landscaping expense reimbursed to us to avoid further damage to existing grassy areas. Needless to say, we have not been fully compensated for the damages and no one will return our phone calls.

I have read the water quality reports and have received letters regarding possible lead contamination.

I have heard of possible dumping in the lake and coupled with our experience regarding the water main break, I am more than upset about the proposed rate hike. I would like to voice our concerns to you in hopes it would be forwarded to those voting on the rate increase. I would reference an entire advisory committee has formed logging their missteps as there have been so many.

Docket Number 2012-177-WS

Relief Requested: * (This section must be completed. Attach additional information to this page if necessary.)

Please deny the request for the rate increase.

STATE OF SOUTH CAROLINA)
)
COUNTY OF York)

VERIFICATION

I, Adrienne Mandon verify that I have read my complaint filed on 08/20/2012
Complainant's Name * Date *
and know the contents thereof, and that said contents are true. *Adrienne Mandon*
Complainant's Signature *

Internal Use Only

Processed By	Date
H.E.	